

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

10602267

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
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25		2		2		
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49						
50						
TOTAL IND.			42			
TOTAL DEP.			54			
TOTAL CLAIMS			96			

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51						
52						
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54						
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99						
100						
TOTAL IND.			42			
TOTAL DEP.			54			
TOTAL CLAIMS			96			

50
42
96